AMPAIGN CONTRIBUTI			tate of Nevada
BOB ADNEY	Office (if applicable)	<u> </u>	<u>42</u>
	MES 単1262	702	District (if applicable)
ng Address (include city and zip code)		Telephone N	0.
Address			
t Appropriate Box(es) 🙇 CANDIDATE	PAC BAG POLPRTY	/ IND EXP AMENDED	ANNUAL FILING
Annual Filing - Due Ja Period: January 1, 2003 - Decem	anuary 15, 2004 ber 31, 2003		
		100	FILL
Report #1 — Due Augus	t 31, 2004		0
nbents in an Office with a 4-year term nbents in an Office with a 6-year term	Period: Jan. 5, 2001 — Aug 26, 20 Period: Dec. 20, 1998 — Aug 26, 2	004	JAN 1 8 2005
hers	Period: Jan. 1, 2004 - Aug. 26, 20	04	Hand Delivered
Advocacy Groups (BAGs) only:	Period: Dec. 5, 2002 – Aug 26, 20	04 SF	DEAN HELLER CRETARY OF STATE
Report #2 Due — Octobe			OR OFFICE USE ONLY
~·.	Period: Aug. 27, 2004 — Oct. 21, 2	2004	ON OFFICE BULLOTIE!
Report #3 Due — Januar		2004	
onl y.	Period: Oct. 22, 2004 — Dec. 31, 2 Period: Oct. 22, 2004 - Dec. 5, 20		
Annual Filing – Due Jan	(2nv 15, 2005		
Period: January 1, 2004 – D	ecember 31, 2004		
d Report suffices for 2005 Ann	ual Filing if candidate also file	d Report Nos. 1 and 2	
			Cumulative
CONTRIBUTIONS :	SUMMARY		From Beginning
		This Perio	of Report Period #1 through End
			of This Reporting
		1000	Pariod #
Total Monetary Contributions Re	ceived in Excess of \$100	# 8 196.6	
2. Total Monetary Contributions Re	ceived of \$100 or Less	0	1085.00
		Complethia Francis	1 - 2 / 40-
	1	Cumulative From Beginning of	
	ļ.	Report Period #1 Through End of	
	# :	This Reporting Period	
 Total Amount of Monetary Con Received 	tributions		
(Add Lines 1 and 2)	4	8196.6	2 46,431.62
 Total Value of In Kind Contribution Excess of \$100 	ns Received in	20,318.53	11
CAGESS OF \$100	00 68.75	2.81c, Ux	
	EXPENSES SUMI	***	\$ 48,498.03
. Total Monetary Expenses Paid in	Excess of \$100	13,123.	00 49,139,50
. Total Monetary Expenses Paid of		8	1741.49
 Total Amount of All Monetary E (Add Lines 5 and 6) 	xpenses Paid	13,123,	140 720
(Add Lines 5 and 6) Total Value of In Kind Expenses in	Excess (1)	-	00 177, KJ, 52
of \$100		0	
	AFFIRMATIO	N	
à Under Bééálte à Démis Thir			
re Under Penalty of Perjury That	me Foregoing is True and Corre	ct.	
7 / 1/			
N Wh			
		Da	te 《
doc /	Revised: Jan-04	PAGEC	PF

#3

BOB	ABNE
Name (print)	

QQ ASSEMBLY
Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH	AMOUNT OF EACH	CHECK HERE
	CONTRIBUTION	Contribution	IF LOAN
ALMAIL ASSOC. OF NV.	10/4	12,500	
1007 H. NEVADA ST Chacon (154 89703	10/28	\$1,000	
ROBERT STACE FOR ASSEMBLY		1 1	
1000 N. GALEN VALLEY PRWY STE-440-370 LUNU FOBTY	10/25	\$ 1,000	
REFUND - AMS	10/25	\$196.62	
OVERTAIN OF MAILING	, , ,		
COMMITTE TO ENSOT BUBBLESS FEST W. CHARLESTON BLAD LYNV FILLT	10/28	\$ 4,500	
PO BOX 66301	10/28	\$1,000	
Lu, nel \$1006		<u> </u>	
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BOK ADUET

ASSEMBLY
Office (if applicable)

42 District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	В
Expenses related to travel	С
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	Ĥ
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	К

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^{**} NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

BOB Name (print) ADNET

ASSEMBLY Office (if applicable)

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A 365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
LAS UEBAS COLOR GAMPHICS 4265 W. SUNSETAD W. NV FIII8	0	10/28	2373,00
NEVADA FLYENS 5643 W. CHANLESTON SIZ. LV, NV FI 146 THE STONIESMA GASUP	0	10/28	1 4,000
14E SINALEAN LAUP 2720 HICKONG OAK BLAD ORLANDU FL, 32817	D	11/10	# 3,750 \$ 3,060
9.5			

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BOB	ADNEY
Name (print)	7

ASSEMBL	9
Office (if applicable)	

District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS.	DATE OF EACH IN-KIND CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION	CHECK HERE IF LOAN
BIZ-PAC 3720 HOWARD HULUES LASVELAS NV 89/09	OCTINOU	PRISTAGE CALLING	14173.21	
NAC 8625 SAHMA UNNU 89/17	10/4	MAIC PIETUS - DESIGN, PRINTING, SHIPPING, MAILING	42695.54	, , , , , , , , , , , , , , , , , , ,
	4			
		10.		

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Revised: Jan-04